

RECEIVED
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OCT 26 2018 3:55 PM
UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK

Omar Minus

17 CV 4623

Write the full name of each plaintiff.

(Include case number if one has been assigned)

-against-

COMPLAINT

Sergeant Bridget Spillana ~~(Plaintiff)~~ Civil
Shield No. 880; OFFICER
Brian Benvenuto, shield 23866
Officer Joseph Tennariello shield 12821

Do you want a jury trial?

☒ Yes ☐ No

Write the full name of each defendant. If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed above must be identical to those contained in Section IV.

USDC SDNY
DOCUMENT
ELECTRONICALLY FILED
DOC #:
DATE FILED: 10-26-18

NOTICE

The public can access electronic court files. For privacy and security reasons, papers filed with the court should therefore *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number. See Federal Rule of Civil Procedure 5.2.

I. LEGAL BASIS FOR CLAIM

State below the federal legal basis for your claim, if known. This form is designed primarily for prisoners challenging the constitutionality of their conditions of confinement; those claims are often brought under 42 U.S.C. § 1983 (against state, county, or municipal defendants) or in a "Bivens" action (against federal defendants).

☒ Violation of my federal constitutional rights

☐ Other: _____

II. PLAINTIFF INFORMATION

Each plaintiff must provide the following information. Attach additional pages if necessary:

OMAR J MINGUS
First Name Middle Initial Last Name

State any other names (or different forms of your name) you have ever used, including any name you have used in previously filing a lawsuit.

15 R 2360
Prisoner ID # (if you have previously been in another agency's custody, please specify each agency and the ID number (such as your DIN or NYSID) under which you were held)

1564 White Plains A.C.
Current Place of Detention

Institutional Address

Dx New York N.Y. 10462
County, City State Zip Code

III. PRISONER STATUS

Indicate below whether you are a prisoner or other confined person:

☐ Pretrial detainee

☐ Civilly committed detainee

☐ Immigration detainee

☐ Convicted and sentenced prisoner

☒ Other: Free at liberty

IV. DEFENDANT INFORMATION

To the best of your ability, provide the following information for each defendant. If the correct information is not provided, it could delay or prevent service of the complaint on the defendant. Make sure that the defendants listed below are identical to those listed in the caption. Attach additional pages as necessary.

Defendant 1:

Bridget Spillane 880
 First Name Last Name Shield #
Sergeant
 Current Job Title (or other identifying information)
7th Police Precinct, 19 1/2 Pitt St,
 Current Work Address
New York N.Y. 10002
 County, City State Zip Code

Defendant 2:

Brian Benvenuto 23866
 First Name Last Name Shield #
Police Officer
 Current Job Title (or other identifying information) 233 W 104th St,
6th Police Precinct,
 Current Work Address
New York N.Y. 10014
 County, City State Zip Code

Defendant 3:

Joseph Temarvello 12821
 First Name Last Name Shield #
Emergency Service Unit
 Current Job Title (or other identifying information)
Edward Hall, 3rd Floor, Floyd Bennett
 Current Work Address
Brooklyn N.Y. 11234
 County, City State Zip Code

Defendant 4:

 First Name Last Name Shield #

 Current Job Title (or other identifying information)

 Current Work Address

 County, City State Zip Code

V. STATEMENT OF CLAIM-

Place(s) of occurrence: Thompson St. and Houston St.

Date(s) of occurrence: April 29, 2015

FACTS:

State here briefly the FACTS that support your case. Describe what happened, how you were harmed, and how each defendant was personally involved in the alleged wrongful actions. Attach additional pages as necessary.

I was driving my 2005 CHRYS, Plate GTP3561 on Thompson Street around 3 A.M. with my head light on then made an legal Right turn onto Houston Street. Suddenly, an unmarked police car with dark tinted windows pulled me over. The Police officer which was driving approached was Bridget Spillane, shield 880. I gave her my Restricted N.Y.S. Drivers License, the officer returned to her vehicle, about 5 mins. She returned then told me I am being arrested for having an suspended Restricted License. I protested stating my Restricted license isn't suspended. While I was being taken into custody demanded none of the Police Officers at the arrest scene not too search my vehicle neither of the officers complied too any of my demands.

The officers that searched my vehicle were Police Officers Brian Benvenuto Shield No. 23866 and Joseph Tennariello Shield No. 13821.

At the 6th Police Precinct, New York City Police Department, 233 W. 104 St., New York, N.Y. 10014. The Officers decided to strip search my person I refused, the Police Officers' involved with this unlawful behavior were Bridget Spillane Brian Benvenuto and Joseph Tennariello. I demanded these Officer not to search my person stripped. Officer Brian Benvenuto threatened to cause physical harm and Joseph Tennariello was in agreement with his partner.

In believing my life was in danger I illegally complied with these officers' instructions. While these officers were conducting the strip search in the 6th Precinct's bathroom, they started sneaking at the sight of my penis.

After the illegal strip search of my person for a non-felony offense, the officers placed me into a holding cell for about 4 hours until I was transported to Manhattan Central Booking, by this time my mental state being felt defeated.

INJURIES:

If you were injured as a result of these actions, describe your injuries and what medical treatment, if any, you required and received.

I have no injuries

VI. RELIEF

State briefly what money damages or other relief you want the court to order.

I would like \$10,000,000.00 for each defendant involved.

VII. PLAINTIFF'S CERTIFICATION AND WARNINGS

By signing below, I certify to the best of my knowledge, information, and belief that: (1) the complaint is not being presented for an improper purpose (such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation); (2) the claims are supported by existing law or by a nonfrivolous argument to change existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Federal Rule of Civil Procedure 11.

I understand that if I file three or more cases while I am a prisoner that are dismissed as frivolous, malicious, or for failure to state a claim, I may be denied *in forma pauperis* status in future cases.

I also understand that prisoners must exhaust administrative procedures before filing an action in federal court about prison conditions, 42 U.S.C. § 1997e(a), and that my case may be dismissed if I have not exhausted administrative remedies as required.

I agree to provide the Clerk's Office with any changes to my address. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Each Plaintiff must sign and date the complaint. Attach additional pages if necessary. If seeking to proceed without prepayment of fees, each plaintiff must also submit an IFP application.

01/22/2018
 Dated _____ Plaintiff's Signature [Signature]
Damon B J
 First Name Middle Initial Last Name Minus
1569 White Plains R.d.
 Prison Address Home
Bx, New York
 County, City State Zip Code N.Y. 10462

Date on which I am delivering this complaint to prison authorities for mailing: _____

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK

USDC SDNY
DOCUMENT
ELECTRONICALLY FILED
DOC #:
DATE FILED: 06/06/2018

-----X
OMAR MINUS,

Plaintiff,

-v-

NEW YORK CITY POLICE DEPARTMENT; OFFICER :
JANE DOE; OFFICER JOHN DOE #1; OFFICER JOHN :
DOE #2,

Defendants.
-----X

17-CV-4623 (JMF)

ORDER


JESSE M. FURMAN, United States District Judge:

As discussed on the record at an initial pretrial conference held by telephone on June 5, 2018, Plaintiff Omar Minus's request for an extension to file his amended complaint is GRANTED: Minus is granted an extension, *nunc pro tunc*, until **July 11, 2018**, to file his amended complaint. Failure to file an amended complaint by that deadline may result in dismissal of the case without further notice to the parties. Attached to this Order is Defendants' letter pursuant to *Valentin v. Dinkins* (Docket No. 27), as well as a blank complaint form.

The Clerk of Court is directed to mail a copy of this Order to Plaintiff at the address below and to update the docket with that address. **Plaintiff is reminded that it is his obligation to ensure that he promptly notifies the Court of any change in his address. Failure to do so could result in dismissal of the case for failure to prosecute.**

SO ORDERED.

Dated: June 5, 2018
New York, New York



JESSE M. FURMAN
United States District Judge

Mail to:
Omar Minus, 15R2360
Queensboro Correctional Facility
47-04 Van Dam Street
Long Island City, NY 11101-3081

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORKOmar Miners

(In the space above enter the full name(s) of the plaintiff(s)/petitioner(s).)

17 Civ. 4623

- against -

New York City
Bridget Spillana
Brian Benvenuto
Joseph Tennavalle

(In the space above enter the full name(s) of the defendant(s)/respondent(s).)

AFFIRMATION OF SERVICE

I, Omar Miners, declare under penalty of perjury that I have
(name)served a copy of the attached Amended Complaint
(document you are serving)upon Pro se office whose address is 500
(name of person served)Pearl St., New York, N.Y. 10007
(where you served document)by Mail
(how you served document: For example - personal delivery, mail, overnight express, etc.)Dated: Rx New York, N.Y.
(town/city) (state)
October 22, 2018
(month) (day) (year)Omar Miners
Signature
1564 White Plains Rd. 6
Address
New York, N.Y.
City, State
10462
Zip Code

Telephone Number _____

Mr. Omar Khimias
1564 White Plains Rd.
Box New York, N.Y. 10462

DO NOT
OPEN

Pro Se Office
500 Pearl Street,
New York, N.Y. 10007

